# WOMEN AND CHILDREN'S SERVICES UNIT



# Prepared by:

California Department of Corrections and Rehabilitation Office of Audits and Compliance



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## Memorandum

Date: AUDITOR'S REPORT

To: Suzan L. Hubbard

Director, Female Offender Programs and Services

**Division of Adult Institutions** 

#### Subject: WOMEN AND CHILDREN'S SERVICES UNIT AUDIT

The California Department of Corrections and Rehabilitation's (CDCR) Office of Audits and Compliance, Audits Branch completed a program audit of the Women and Children's Services Unit (WCSU), which oversees the Community Prisoner Mother Program (CPMP) and the Family Foundations Program (FFP).

The Audits Branch conducted the audit in accordance with generally accepted governmental auditing standards, including tests of controls and other such auditing procedures considered necessary under the circumstances.

The scope of the audit was limited to program compliance activities for the period of July 1, 2006 through December 31, 2007. The audit fieldwork was conducted during the period of March 10 through March 27, 2008.

The specific objectives of the audit were to determine if:

- WCSU has complied with the Penal Code (PC), Sections 1174 and 3410-3424.
- WCSU has complied with the CPMP and FFP contracts, Program Directives, the Department Operations Manual (DOM), and the California Code of Regulations (CCR), Title 15, which governs the CPMP and FFP.
- WCSU is providing oversight in an effective and efficient manner to the contractors administering the CPMP and FFP programs.

The procedures performed in the audit included:

- Interviews with current and former WCSU personnel.
- A review of policies and procedures to evaluate compliance with the PC, Sections 1174 and 3410–3424.

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- A review and evaluation of program directives and contracts issued by WCSU.
- A review of WCSU's reports, documents, and procedures.

The Audits Branch identified six findings and one observation in the following areas: internal controls, contract management, inmate appeals and discipline, reporting requirements, staffing, and program oversight. Observations highlight certain areas that may be of interest to users of the audit report. Observations differ from audit findings in that they may not include attributes (condition, effect, criteria, cause, and recommendation) that are presented in audit findings.

RICHARD C. KRUPP, Ph.D. Assistant Secretary Office of Audits and Compliance

March 27, 2008 (last date of field work)

The CDCR's WCSU oversees the CPMP and FFP programs. The two programs have six facilities in California, which are located in Oakland, Fresno, Bakersfield, San Diego, Pomona, and Santa Fe Springs. The Audits Branch conducted program contract compliance audits of five of the facilities, as part of the overall program audit of the WCSU. Separate audit reports were issued to the contractors at these facilities. The sixth facility at Fresno was not included in the scope of the audit, as it wasn't activated until November 2007. While each facility has some unique problems, the Audits Branch identified several reoccurring issues, which can be attributed to insufficient oversight by WCSU.

During the audit period of July 1, 2006 through December 31, 2007, WCSU experienced disruption of services with the temporary transfer of inmates at the Oakland facility, based upon the Audits Branch's discovery of unacceptable living conditions. The contractor over the San Diego FFP facility, Center Point, Inc. was under investigation for alleged child abuse and neglect. The investigation by the San Diego Police Department's Child Abuse Unit took place over a seven month period. An investigation by CDCR's Office of Internal Affairs ran a concurrent investigation on CDCR's employee misconduct. The contract with Center Point, Inc. was canceled on April 27, 2008. In addition, the WCSU experienced a 91 percent turnover rate in staff, including a new chief for the unit.

The program audit of WCSU identified six findings and one observation. The findings and observations are summarized below and are discussed in more detail in the Findings and Recommendations and Observations and Recommendations sections of this report.

## FINDING 1: Internal Control Weaknesses

WCSU has internal control weaknesses in the following four areas: Fiscal, Inmate Appeals and Discipline, Staffing, and Desk Procedure Manuals.

- Fiscal: Contractor invoices are being approved without the appropriate staff verifying if services were satisfactorily performed. The contract budgets were tracked only by the recently hired Associate Governmental Program Analyst (AGPA).
- Inmate Appeals and Discipline: Inmate appeals are not logged by the formal level appeal date, and specific staff are not assigned as primary coordinators for inmate appeals or inmate discipline. The inmate Disciplinary Action Log and Appeal Log are not reviewed on a consistent basis by the WCSU Chief.

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- 3. <u>Staffing</u>: WCSU doesn't have a full-time Correctional Counselor (CC) III at the Bakersfield and Pomona CPMPs, and the WCSU does not consistently provide vacation, sick, or vacant position relief of field CC III positions.
- 4. <u>Desk Procedure Manuals</u>: WCSU doesn't have desk procedure manuals, which would aid in the training of new staff and provide consistency in operations. WCSU's high turnover rate of 91 percent in less than one year highlights the importance of having updated desk operational procedures.

## **FINDING 2: Contract Management**

- WCSU directed CPMP and FFP to overpopulate their facilities, violating contract provisions and CCR, Title 9 Policy.
- Over a seven month period, a contractor performed services without an approved contract or reimbursement.

## FINDING 3: Inmate Appeals and Discipline

An inmate appeal involving a serious issue at the FFP in San Diego was not properly logged. Specifically:

- The Disciplinary Action Log summarizing the Report of Rules Violation (CDC 115) was missing key entries for many of the CDC 115s.
- CDC 115s were missing from WCSU files.
- One CDC 115 hearing was 84 days late.

### **FINDING 4: Reporting**

WCSU does not monitor or enforce contractor reporting requirements related to the weekly sign-in sheets and monthly reports.

#### FINDING 5: Staffing

- Contractors are leaving positions vacant for long periods of time and not providing adequate staffing coverage.
- The resumes of newly hired contractor staff are not reviewed by WCSU to ensure that minimum hiring qualifications are met.

## FINDING 6: Oversight

WCSU has failed to enforce contract requirements in the following five areas:

- 1. Tuberculosis (TB) Testing
- 2. Training
- 3. Insurance
- 4. Monitoring
- 5. Inmate Assignment

## **OBSERVATION 1: Contract and Program Directives Language**

Language within the contracts and program directives do not contain definitive performance measures or scope of work requirements within key areas of the program.

# WCSU RESPONSE

In response to the draft report, the FOPS submitted a draft corrective action plan (CAP). FOPS acknowledged each finding and observation and addressed each area in the CAP. The Audits Branch is satisfied with FOPS' response. The Audits Branch may conduct a follow-up review to ensure compliance within a 6 to 12 month period.

The CDCR, mandated by PC, Section 1174 for the FFP and PC, Section 3410, et seq for the CPMP, is charged with overseeing the two programs. Each program has three separate facilities. The six facilities are located in Oakland, Pomona, Santa Fe Springs, San Diego, Bakersfield, and Fresno.

Women sent to the FFP are sentenced under the PC, Section 1174, known as the Pregnant and Parenting Women's Alternative Sentencing Program Act. To be eligible for the program, women must have a history of substance abuse, be pregnant, or parenting a child less than six years of age, no violent criminal history, and not have a sentence of more than three years.

Inmates in the FFP spend 12 months in a residential substance abuse program, followed by 12 months on parole. The goal of the program is to reduce the incidence of drug relapse, child abuse, criminal activity, and the recidivism rate of women paroling from CDCR.

To be accepted into this program, women must agree to participate in therapeutic modalities designed to improve their coping skills, help defeat their substance abuse problems, and enhance their parenting skills.

The CPMP was authorized by Assembly Bill 512 and operates under the PC, Section 3410, et seq. The CPMP reunites female inmates with their children under the age of six years old. The objectives of the CPMP are to promote substance abuse recovery, independent living, self-reliance, community reintegration, and decrease recidivism by turning female parolees into successful law-abiding citizens.

The WCSU, a program under the FOPS, has a staff of 11. The staff is responsible for all aspects of custody, as well as contract and program management over the six facilities. Ten of the eleven staff (91 percent) have less than one year experience with WCSU.

## FINDING 1: Internal Control Weaknesses

WCSU has internal control weaknesses in the following four areas: Fiscal, Inmate Appeals and Discipline, Staffing, and Desk Procedure Manuals.

#### **Fiscal**

- 1. Contractor invoices are being approved without the appropriate staff verifying if services were satisfactorily performed. WCSU headquarters' staff approves invoices without confirmation from field staff as to whether the expenses billed are appropriate.
- 2. Contract budgets were tracked only by the recently hired (July 2007) Associate Governmental Program Analyst (AGPA), who transferred out of WCSU in April 2008.

## **Appeals and Inmate Discipline**

- 1. Inmate appeals are not logged by the formal level appeal date. For example, when a formal level appeal is processed in one month, and that same appeal is elevated to the next level, the new higher level appeal is not logged with the new date.
- Specific staff is not assigned as primary coordinators for inmate appeals or inmate discipline. A WCSU CC II will process the appeals and inmate discipline reports; however, any staff person can process an appeal or discipline report at any given time.
- 3. The inmate Disciplinary Action Log and Appeal Log are not consistently reviewed by the WCSU Chief.

#### Staffing

- 1. Lack of a full-time CC III at the Bakersfield and Pomona CPMP increases security and operational risks. There is one staff person splitting her time between the two programs, which are over two hours apart (Pomona and Bakersfield). Time is split by days, resulting in each program not having a custody staff member present for at least two full business days per week, in addition to the weekend.
- 2. WCSU does not consistently provide vacation/sick/vacant position relief of field CC III positions.
- 3. WCSU had a 91 percent turnover rate in the past year. Ten out of the eleven positions have less than one year experience in WCSU. Two of the eleven

positions (Office Technician and AGPA) have just recently been approved and filled.

## **Desk Procedure Manuals**

WCSU does not have desk procedure manuals, which would aid in the training of personnel and providing consistency of operations. Many of WCSU's systems currently in place, as explained by staff, were of their own doing in an attempt at a logical division of duties. WCSU's high turnover rate of 91 percent in less than one year highlights the importance of having updated desk procedures.

#### **CRITERIA:**

The Financial Integrity and State Manager's Accountability Act of 1983 requires that State agencies establish and maintain systems of internal accounting and administrative control to safeguard assets, maintain data accurately and reliably, promote operational efficiency, and encourage adherence to prescribed managerial policies. Specifically, California Government Code, Section 13401 requires that the systems of internal accounting and administrative control be evaluated on an ongoing basis and that weaknesses be corrected promptly when they are detected.

The State Administrative Manual, Section 20050, Internal Control (from Government Code, Sections 13400-13407), further addresses internal control deficiencies. It states in part: "Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system. These systems may apply to the organization as a whole or to individual units or activities. Entity heads and managers should identify and make the necessary corrections when warned by *any* of the danger signals listed below:

- Policy and procedural or operational manuals are either not currently maintained or are nonexistent.
- Lines of organizational authority and responsibility are not clearly articulated or are nonexistent.
- Financial and operational reporting is not timely and is not used as an effective management tool.
- 4. Line supervisors ignore or do not adequately monitor control compliance.
- No procedures are established to assure that controls in all areas of operation are evaluated on a reasonable and timely basis.
- 6. Internal control weaknesses detected are not acted upon in a timely fashion.
- 7. Controls and/or control evaluations bear little relationship to organizational exposure to risk of loss or resources."

## **Fiscal Criteria**

- 1) CPMP Contract, Scope of Work, C. Role of On-Site Department of Corrections and Rehabilitation (DCR) [sic] Custody Staff, number 4, requires custody staff at the facility to conduct routine invoice review and contract monitoring.
- 2) On each invoice, there is an invoice signature block, which states: "The undersigned certify, by review and verification of the attached documentation, satisfactory service has been provided in accordance with the above referenced contract."
- 3) As part of the duty statement for the CC III (Field), it states that a portion of their time is to be spent: "...reviewing monthly invoices...."

## **Staffing Criteria**

Per the CPMP Contract, Scope of Work, C. Role of On-Site DCR (sic) Custody Staff, number 2, it states that the duties of the on-site staff is to: "...provide custodial oversight, day-to-day custody management and ensure adherence to program and security requirements in order to maintain the integrity of the program as specified in the Director's Rules, Title 15, and the DOM."

#### **RECOMMENDATIONS:**

#### **Fiscal**

- The on-site CC III should review the invoices, provide comments if needed, and approve invoices before submitting them to headquarters staff for processing and reimbursement.
- Contract budget tracking, such as the one implemented by the prior AGPA, should be incorporated permanently as part of the invoice approval process.

#### **Appeals and Inmate Discipline**

- The WCSU Chief should review and initial or sign the inmate appeal and CDC 115 logs on a monthly basis.
- Appeals should be logged in the corresponding month for each formal level. For example, if a first level appeal is submitted and logged in January, the 2nd level of the same appeal submitted in March should be logged in March as a 2nd level appeal, separate and distinct from the first level in January.
- WCSU should consider assigning a staff member separate from the Appeals Coordinator for the initial logging of inmate appeals. This will support the

separation of duties concept and reduce the risk of appeals being manipulated or lost.

- A CC II in WCSU should be specifically assigned as the appeals coordinator to screen, categorize (as needed), and coordinate the processing of appeals (CCR, Title 15, Section 3984.3, Screening Appeals (a)). The WCSU appeals coordinator should be responsible for appeal processing being in compliance with applicable departmental policies and regulations.
- A CC II in WCSU should be specifically assigned as the inmate discipline coordinator to log and coordinate the processing of the CDC 115s. The WCSU inmate discipline coordinator should be responsible for CDC 115 processing being in compliance with applicable departmental policies and regulations.

## **Staffing**

- A full-time CC III should be assigned to each CPMP and FFP facility.
- Temporary field vacancies should have custody staff assigned as a backup. Lower turnover will increase the availability of staff.

#### **Desk Procedure Manuals**

- Desk procedure manuals should be developed for each WCSU position.
- Delineate all requirements of the contractors. Prepare written job duty statements in relation to those requirements, in order to ensure that all requirements are under the scrutiny and responsibility of a WCSU staff member.
- Provide adequate training for all new hires.

#### **FINDING 2: Contract Management**

1. WCSU directed the CPMP and FFP to overpopulate their facilities.

The East Bay Community Recovery Project (EBCRP), under WCSU's oversight, received a Department of Alcohol and Drug Programs (DADP) inspection, which produced Notice of Deficiency and Certification reports that included nine Class B violations, four Class C violations, and three other licensing deficiencies. The Class B violations require correction in 10 days and the Class C violations require correction within 30 days.

WCSU subsequently directed the transfers of inmates from the EBCRP into other facilities: Los Angeles Center for Alcohol and Drug Abuse (LACADA) (FFP), Turning Point (CPMP), and Prototypes (CPMP). All three facilities exceeded their contract population capacity. Two facilities exceeded their DADP

licensed capacity. In order to correct Class B and C violations, WCSU directed two contractors to commit a more serious CCR, Title 9, Class A violations. Class A violations require *immediate abatement*; however, the inmates were assigned in the programs for three weeks.

The overpopulation violated the terms of each contract, created safety violations, and resulted in CCR, Title 9, Class A violations. A Class A violation without immediate correction authorizes the fire department or the DADP to shut down a facility. The reassignment of inmates and overpopulating the facilities occurred without a contract amendment, emergency contract, or the funding to pay for the services.

2. Over a seven month period, a contractor performed services without an approved contract or reimbursement. The Office of the Receiver held up the commencement of the Turning Point contract. The contractor, with WCSU's approval, provided services without a contract or receiving reimbursement from July 1, 2007 through February 26, 2008.

#### **CRITERIA:**

1. a) CCR, Title 9, Section 10513.

From DADP: "When a Class A deficiency is noticed, it must be abated immediately. For over capacity, we require the extra beds to be broken down and stored away. We will not leave the facility until a Class A deficiency is corrected. In addition, we charge an immediate \$50 penalty (to be paid at a later date). We cite Class A deficiencies for any reason we deem to be extremely unsafe or dangerous (no staff with first aid/CPR, exposed electrical wiring, over capacity, missing stairs, etc.). We have also closed facilities immediately and evacuated the residents to other programs (although rare)."

- b) CPMP contract numbers LACADA C01.119, Prototypes C05.004, Turning Point C07.003, Scope of Work, B. Role of the DCR's Women and Children's Services Unit, number 2, states in part that the program is to: "...retain responsibility for program compliance with all laws, regulations, policies and procedures relevant to incarceration."
- c) Per State Contracting Manual, Section 1.06: "Statutes, regulations, and policies governing the state's contracting process are designed to protect the state's interests. Therefore, it is not appropriate to seek artificial exceptions to contracting requirements or to seek loopholes. In particular, circumvention of required competitive bidding or contract approval is unlawful."
- 2. Per State Contracting Manual, Section 4.03, CONTRACTS REQUIRING DEPARTMENT OF GENERAL SERVICES (DGS)/OFFICE OF LEGAL SERVICES (OLS): "The DGS/OLS has statutory authority under several sources to approve the following contracts: . . . (d). The performance of work or services

by the state agency for or in cooperation with any person, or public body, are void unless and until approved by the department."

#### **RECOMMENDATIONS:**

- Legal emergency contracts or amendments should be processed in order for a contractor to perform additional services and receive reimbursement for those services. Other options should be explored before creating a Class A violation and jeopardizing fire/emergency safety practices.
- 2. The Audits Branch acknowledges the irregular nature of the Office of the Receiver's actions. However, the State contracting policies still require a valid contract before services may begin.

#### FINDING 3: Inmate Appeals and Discipline

1. An inmate appeal filed against the CC II at the FFP in San Diego was not properly logged.

Although the log indicates a response deadline for a formal appeal, the formal level appeal itself is not in the file. The outcome or CDCR response is unknown. The CDCR response was assigned to a peer (the CC III at LACADA) of the CDCR individual, whom the appeal was filed against.

2. The Disciplinary Action Log summarizing CDC 115s was missing key informational entries for many of the CDC 115s.

The Disciplinary Action Log contained multiple instances of missing information regarding the appeals, including hearing dates and status. The log doesn't allow the ability to track the CDC 115s.

3. CDC 115s are missing from WCSU's files.

In tracing the CDC 115s on file to the Disciplinary Action Log, there were CDC 115s that were missing. Due to the lack of key data entries mentioned above, the location or status of the CDC 115s is unknown.

4. One CDC 115 hearing was 84 days late.

In most instances, a disciplinary hearing must be held within 30 days of the inmate's receipt of the CDC 115. One CDC 115 tested was 84 days late. Even though the hearing officer rendered a "not guilty" verdict, there was still a significant delay in the hearing.

#### CRITERIA:

- Per CCR, Title 15, Chapter 1, Article 8, Section 3084.5.a.3, Appeals: "g) Written response. At each level of review not waived, the original appeal shall be returned to the appellant with a written response stating the appeal issue and reasons for the decision."
- Per CCR, Title 15, Subchapter 4, Article 5, Section 3320 (b), Inmate Discipline: "The charges shall be heard within 30 days from the date the inmate is provided a copy of the CDC Form 115 unless the charges were referred for possible prosecution and the inmate has been granted a request for postponement of the disciplinary proceedings pending the outcome of the referral, or if the inmate is transferred out of the custody of the department."

#### **RECOMMENDATIONS:**

- All appeals filed against contractor administrators or custody field staff should be assigned to the Chief of WCSU for the initial departmental response.
- Inmate Appeals and CDC 115 logs should be filled out completely and accurately.
- All CDC 115 hearings should be completed on time.
- The CDC 115 Tracking/Disciplinary Action Log should track the location and status of all CDC 115s under the WCSU's responsibility.

## FINDING 4: Reporting

WCSU does not adequately monitor or enforce contractor reporting requirements for the weekly sign-in sheets and monthly reports.

#### **CPMP Monthly Reports**

The monthly reports from the CPMPs are due by the 10th of each month. The auditors reviewed 21 reports (7 months and 3 contractors), in which none were submitted timely. Turning Point submitted five reports in the month of January 2008, backdating them to August 2007. Prototypes sent five reports to WCSU on February 29, 2008, backdating them to October 2007.

legend	n/r = no report submitted / n = not timely / y = timely							
C05.004	Prototypes	n/r	n/r	n/r	n	n	n	n
C05.003	East Bay	n/r	n/r	n	n	n	n	n
C07.013	Turning Point	n/r	n	n	n	n	n	n/r
Contract Number	Contractor	Jul 07	Aug 07	Sep 07	Oct 07	Nov 07	Dec 07	Jan 08

## **FFP Monthly Reports**

The monthly reports for the FFPs are due on the 15th of each month. Only 6 out of 17 (the FFP in Fresno opened in November 2007) reports reviewed for the period of July 1, 2007 through January 31, 2008, were submitted timely.

Contract Number	Contractor	Jul 07	Aug 07	Sep 07	Oct 07	Nov 07	Dec 07	Jan 08
C01.119	L.A.CADA	n	у	n	n	n/r	n	n
C05.002	Center Point	у	у	у	n	n	у	у
C07.001	WestCare	n/a	n/a	n/a	n/a	n	n	n/r
legend n/r = no report submitted / n = not timely / y = timely n/a not applicable facility opened in 11/07								

## **Program Directive for Weekly Staff Sign-in Sheets**

Program directive B-07, dated April 2005 requires all facilities to submit a weekly staff sign-in roster. The roster is to include the printed names, signatures, and actual hours worked. WCSU requires the weekly roster to ensure adequate staffing and to monitor contract compliance. In addition, long-term vacancies (over one week) due to vacation or sick leave were not noted on the sign-in sheet.

The report is due each Monday morning. A CC II at WCSU stated that none of the facilities complied with this directive.

#### **CRITERIA:**

Per contract number C05.002 (FFP), exhibit A, D, 5, and a, the contractor will: "...submit monthly data collection reports of all program activity during the previous month....Monthly reports are to be submitted on or before the 15th of each month."

Per contract number C05.003 (CPMP), exhibit A, D, and d, the contractor will: "...submit to the WCSU, monthly progress reports of all program activity during the previous month. Monthly reports are to be submitted on or before the 10th of each month."

Per program directive: B-07, Weekly Staff Sign-In Roster Requirements, April 2005, "The purpose in submitting a weekly staff sign-in roster to the Women and Childrens' Services Unit is to report vacancies, back-up coverage, and provide an ongoing weekly staffing roster to the field correctional counselor...staff is to be advised to print their names legibly, sign the sheet, and show the actual hours of work."

#### **RECOMMENDATIONS:**

- For continuity, the monthly reporting requirements should be the same for both programs. Currently, the CPMP and FFP reports have different timeframes (the 15th and 10th, respectively).
- To ensure data is accurate, field counselors should sign and date monthly reports prior to the contractor submitting them to WCSU.
- Implement policy requiring the chief (or designated CC II) of WCSU to sign and date the monthly reports, indicating that they have been reviewed. Items requiring attention should be documented and followed up on.
- WCSU should enforce timely submission of monthly reports.
- WCSU should require contractors to submit the weekly sign-in rosters.
- WCSU's designated staff member should sign and date the weekly sign-in roster, indicating it has been reviewed.

## FINDING 5: Staffing

- 1. Contractors are not filling vacant positions in a timely manner, or the positions filled are not providing adequate coverage.
  - A. The contract with Prototypes requires 4.2 Supervising Counselors. During the fiscal year 2006/07, Prototypes only filled between one and three of the positions. The schedule requires coverage on a 24/7 basis, although there is no coverage in the facility from 1:00 a.m. to 6:00 a.m.
  - B. Center Point had 1.5 positions for a licensed clinical social worker. Center Point did not have the licensed clinical social worker position filled for the 17 months period of July 2006 through November 2007 (save 25 days); rather, they had the position occupied by an intern who required supervision by a licensed social worker.
  - C. The EBCRP had only two staff members on-site to supervise the CDCR women, their children, and the co-populated facility of Alameda County's perinatal residents and their children. Combine this with visitors from both CDCR and Alameda County, and there is limited contract staff supervision.

2. The resumes of staff hired are not always reviewed by WCSU to ensure minimum contractual qualifications are met.

WCSU only looks at a potential hire (other than performing a background check) when the position requires a specific license, such as a registered nurse or a licensed clinical social worker, or the position is high level, such as the program manager. In the audits performed for each of the five CPMP and FFP contractors, the Audits Branch had findings in each of the five facilities in which the contractor's staff did not meet CDCR's minimum hiring qualifications.

Employees not meeting the contract's hiring qualifications jeopardize the integrity of the program. Several inmates told the Audits Branch they knew more about substance abuse counseling than some of those teaching the classes.

#### **CRITERIA:**

Per contract number C01.119, attachment A, D, and 1, the contractor shall: "Recruit, hire, and retain qualified staff."

Per contract number C05.002, Exhibit A, D. and 1, (c): "Licensed Clinical Social Workers (LCSW). Qualifications: possession of a valid license as a LCSW issued by the California Board of Behavioral Science Examiners. Registered Intern with Board of Behavioral Science, eligible for supervised licensure status and must be eligible for licensure within two years...NOTE: a full-time licensed professional must fill one of the two Social Worker positions."

Contract, Scope of Work, E. Staffing Requirements, details qualifications for specifically required positions.

#### **RECOMMENDATIONS:**

- 1. A. Do not allow budgeted salary funds for vacant positions to be used for contract expenditures other than salaries and wages.
  - B. Require the contractor to maintain contractually required staffing levels.
  - C. Include language in all future contracts that would allow CDCR to penalize contractors with long-term vacancies in critical positions.
- Review the qualifications for all contractors' job candidates when processing security clearances. If the contractor is unable to obtain staff with minimum standards, require the contractor to justify the hiring in writing, along with submitting a plan to train and educate the candidate in order to bring them up to minimum standards.

Contractors attribute the lack of a decent candidate pool to low pay for the areas. The Audits Branch agrees, as the facilities are in metropolitan areas that command higher salaries. Nonetheless, contractors must work within the fiscal parameters of the contract and diligently seek out qualified individuals.

## **FINDING 6: Oversight**

WCSU did not enforce contract requirements of the FFP and CPMP's contractors for the following areas:

TB Testing
Training
Insurance
Monitoring
Inmate Assignment

## **TB Testing**

The contractors' employees and inmates must be tested annually for TB. The Audits Branch recently conducted program audits on five of the FFP and CPMP facilities, and the three CPMP facilities were not in compliance.

One problem identified in each program was the lack of continuity for TB testing. For example, a contractor who has 30 employees could have TB anniversary test dates in each month of the year, which by the contractor's admission is a tracking nightmare. According to WCSU staff, there are no controls in place to monitor and ensure annual TB testing. Inmate TB testing in the FFP programs is not required, as the inmates are tested prior to arrival and program for only one year. TB testing in the CPMP programs was not tracked.

## **Training**

WCSU has different training requirements for the CPMP and FFP programs. According to the contracts, the FFPs require:

#### **FFP Training Requirements**

Hours Required	Responsible for Training	Type of Training
12	CDCR	Policies and procedures
40	Contractor	Various
40	Contractor	New employee orientation

According to the contracts, the CPMPs require:

#### **CPMP Training Requirements**

Hours Required	Responsible for Training	Type of Training
16	Contractor	New hire- prior to assuming duties
40	Contractor	Various

Although the FFP contract states the annual training plan must be approved by WCSU, no one in WCSU has seen evidence of a training schedule or plan. Additionally, the audits on the two FFPs: LACADA in Santa Fe Springs and Center Point in San Diego, revealed problems in verifying training requirements.

The Audits Branch identified similar findings in each of the five contractor's audits:

- Poor tracking mechanisms in place, i.e., no comprehensive training data base for program managers to review.
- Required training hours not met.
- Specific training courses required were not offered.
- CDCR training was lacking.
- Inconsistencies in documenting training, for example:
  - Training records are kept in a binder but not in the employees' files.
  - Training records in the employee files but no master roster.
  - Training records were missing the start and stop times of the training course.

The Audits Branch identified the following deficiencies:

- Contractors are not held accountable for not providing training.
- WCSU does not receive the cross training roster, which is required to be signed and dated by employees per program directive B-06.
- WCSU does not verify or track contractually required training hours.
- WCSU does not have an employee training file, as required per program directive B-06.
- Training requirements for the FFP and CPMP programs are not standardized.

### **Auto Insurance Requirements**

Two contractors were out of compliance with respect to auto insurance requirements for the facility drivers. The contract requires:

- No tickets or arrest for driving under the influence (DUI) within five years.
- No at fault accidents within the past three years.

Center Point's insurance criteria:

- No DUI within the past four years.
- No more than two at fault accidents in the past three years.

#### L.A.CADA's insurance criteria:

No more than two at fault accidents within the past five years.

WCSU was not aware of the discrepancies with the insurance coverage. contractors are not required to submit their auto insurance policies or the designated drivers' DMV records.

## Monitoring

At the beginning of audit fieldwork, the CC II at EBCRP furnished the Audits Branch with a comprehensive document titled, "Community Prisoner Mother Program, Family Foundations Program, Program Audit Instrument." The cover sheet displayed "Audit Findings" and space for notations. The former WCSU chief said his team had an audit instrument; however, he did not have a copy of the audit document his team used. There were no instances of formal monitoring performed at any of the programs.

## **Inmate Assignment**

The LACADA audit revealed a Mexican National being admitted to the FFP with an immigration hold. During the Center Point audit, it was discovered that an inmate was assigned to the FFP without her child. She "graduated" after programming for five of the required 12 months, and without her child present.

#### **CRITERIA:**

Program directive B-06 lists an additional 16 hours of cross training, a requirement of both programs. The program directive states: "The provider must submit a list of training goals and proposed training topics for each calendar year by the end of December. Cross training sessions, whether formal or informal will be documented. A copy of the sign-in sheet/attendance record shall be forwarded to the WCSU, via the on site CDC staff representative, to be placed on the employee training file."

Per contract number C05.002, exhibit A, C, D, and 2: "A minimum of 40 hours of annual training shall be provided to facility staff. All newly hired staff will be provided with a minimum of 40 hours orientation training....the DCR [sic] shall provide a minimum of 12 additional hours training."

Per contract number C05.003, exhibit A, D, 1, and b, the contractor shall: i). "Provide an orientation (minimum of 16 hours, review and approved by the WCSU)...ii). Make available a minimum of 40 hours of annual training for all contractor staff."

Per program directive B-06, Cross Training Requirements, April 2005: "Providers shall provide 16 hours of cross training between CDC and contract staff, which is an annual requirement....the provider must submit a list of training goals and proposed training topics for each calendar year by the end of December."

Per contract number C05.002, exhibit D, 25: "Contractors and their employees who are assigned to work with inmates on a regular basis shall be required to be examined or tested or medically evaluated for TB in an infectious or contagious stage, and at least once a year thereafter or more often as directed by DCR [sic]."

Per DOM, Chapter 9, Article 8, Section 91080.3: ". . . CDC facilities shall have established TB testing programs to ensure that inmates are tested on an annual basis."

Per contract number C05.002, exhibit A and D: "1. Contractor will designate driver(s) . . . staff who drive for the FFP must 1) possess a valid Class C driver license, 2) have no record of tickets or arrest for Driving Under the Influence in the last five years, and 3) have no accidents within the last three years for which the staff was responsible."

Per the Department of General Services, State Contracting Manual, Chapter 9, Responsibilities of the Contract Manager, 9.04, 3), "Ensure compliance with all federal or special regulations", and "7. Monitor the contract to ensure compliance with all contract provisions: a. Monitor progress of work to ensure that services are performed according to the quality, quantity, objectives, timeframes, and manner specified in the contract; e.g., review progress reports and interim products."

The CC III (Field) duty statement states in part the following duties: "... performing weekly custody audits and inspections of facilities ... conducting formal monitoring of operations of programs."

The CPMP Contract, Scope of Work, B. Role of the DCR's Women and Children's Services Unit, states: "3. Administer and monitor all CPMP contracts," and "6. Conduct quality assurance program reviews throughout the duration of the program."

Per the Government Code, Section 13401 (b), 1 through 3: "(b) The Legislature declares it to be the policy of the State of California that: (1) Each state agency must maintain effective systems of internal accounting and administrative control as an integral part of its management practices. (2) The systems of internal accounting and administrative control of each state agency shall be evaluated on an ongoing basis and, when detected, weaknesses must be promptly corrected. (3) All levels of management of the state agencies must be involved in assessing and strengthening the systems of internal accounting and administrative control to minimize fraud, errors, abuse, and waste of government funds."

#### **RECOMMENDATIONS:**

#### **TB Testing**

- Require the field counselor to maintain files on inmates TB testing, in order to ensure inmates are tested annually.
- Require contractors to standardize TB testing by following the CDCR model.
   Designate one month of each year as the month in which all employees are tested.

• The field counselor should maintain a spreadsheet of the employees' TB test results and a file with test results, signed off by medical professional.

## **Training**

- Create WCSU employee training files referred to in program directive B-06.
- Standardize training requirements for the CPMPs and FFPs.
- Require the contractors to submit completed training class rosters to WCSU.

## **Auto Insurance/Driving Requirements**

- Require contractors to submit the automobile insurance coverage to ensure contract compliance.
- Perform an annual audit on the drivers' record for each facility's designated driver.

## **Monitoring**

• Use existing audit tool or create a new tool for WCSU staff. Use the tool to monitor each facility quarterly, semi-annually and annually.

## **Inmate Assignment**

 Implement procedures to ensure that inmates assigned to the FFP and CPMP programs are eligible.

## **OBSERVATIONS AND RECOMMENDATIONS**

## **OBSERVATION 1: Contract and Program Directives Language**

Contract language lacked definitive performance measures and scope of work requirements in the following areas:

1. Area: Treatment Services.

Reference: Scope of Work, D. Role of the contractor, 2 Treatment Services, a. Assessments.

Language: ". . . individual progress reports and progress notes updated regularly."

Issue: "Regularly" is not defined.

Area: Treatment Services.

Reference: Scope of Work, D. Role of the contractor, 2. Treatment Services, b. Individualized Treatment Plans.

Language: "The Contractor will develop, review and revise individualized treatment plans for women and children."

Issue: Standards for treatment plans are not defined.

3. Area: Treatment Services.

Reference: CPMP Contract. Scope of Work, D. role of the Contractor, 2. Treatment Services, d. CPMP Programming, Required Classes/Services (table). PC, Section 3412(a)(2). The Required Classes/Services table in the CPMP contract states: employment/vocation preparation, and counseling.

Language: Programs . . . geared to accomplish the following: (C) The mother's ability to function in the community, upon parole or release, arrangements after participation in the program. (E) The securing of adequate child care arrangements after participation in the program.

Issue: Although the contract, in section 2, Treatment Services, c. Transition to the Community, expresses transitional services, language does not specifically state that there is an actual programming requirement to formally train inmates in transitional services that the PC expresses. Required Classes/ Services should include the specific language as indicated in the PC.

4. Area: Required Classes/Services.

Reference: Contract: Scope of Work, D. Role of the Contractor, 2. Treatment Services, d. CPMP Programming, Required Classes/Services (table).

Language: Twelve-Step Programs including AA, NA (minimum of three per week).

Issue: "Three per week" is not clearly defined; three sessions, three hours, etc.

5. Area: Treatment Services.

Reference: Scope of Work, D. Role of the Contractor, 2. Treatment Services, a. Assessments, b. Individualized Treatment Plans, and c. Transition to the Community.

## Language:

- a. Assessments: the written assessment is to be conducted on a standardized form reviewed and approved by the WCSU prior to implementation.
- b. Individualized Treatment Plans: ". . . and input from the DCR staff . . . . "
- c. Transition to the Community: ". . . in cooperation with the DCR CC . . . working in conjunction with the DCR CC."

#### Issue:

- a. Contract language implies that the form, and not the individual written assessment, is approved by WCSU. Individual assessments should be reviewed and initialed/approved by WCSU field staff.
- b. Individualized treatment plans should be reviewed and initialed/approved by WCSU field staff.
- c. Working in cooperation/conjunction does not necessarily require WCSU field staff review and approval. The Pre-Release Treatment Exit Plan required 60 days prior to release, incorporation transition to community services, should be reviewed and initialed/approved by WCSU field staff.

## **Program Directives Language**

The Program Directives lacked definitive performance measures in key areas as follows:

1. Area: Urinalysis Testing.

Reference: Program Directives, Zero Drug Tolerance, C-03.

Language: Criteria for Urinalysis Testing.

Issue: Although language regarding collecting and reporting is extensive in the Program Directives, the frequency is not defined. Frequency should be objectively and

consistently defined, not subjectively at the opinion of the CC as in the FFP Contract (Scope of Services, C. Role of the Contractor for Program Services, 1. Intensive Correctional-Based Substance Abuse Treatment for Both Drug and Alcohol Users, m. (urine testing).)

2. Area: Inmate Savings Agreement.

Reference: Program Directives, Disposition of Money for Inmates Returned to State Prison or Escapee from Program, A-12.

Language: As a condition of participation in the program, all new inmates are required to sign a Savings Program Agreement (SPA). The Contractor should review and update the SPA with the inmate once every six months. The Field CC shall review the SPAs to ensure compliance with this expectation.

Issue: The Savings agreement form listed in the program directives was not being used at EBCRP.

#### **CRITERIA:**

Provided in each table under the "Reference" row.

#### **RECOMMENDATIONS:**

Review Contract language and make appropriate changes on each contract renewal's Request for Proposal and subsequent contract. Review the Program Directives' current language and make appropriate changes on the next update of the Program Directives.

## GLOSSARY

**AGPA** Associate Governmental Program Analyst

CC Correctional Counselor (II or III)
CCR California Code of Regulations

CDC California Department of Corrections (now CDCR)

CDC 115 Report of Rules Violation

**CDCR** California Department of Corrections and Rehabilitation

**CPMP** Community Prisoner Mother Program **DADP** Department of Alcohol and Drug Programs

**DCR** Department of Corrections and Rehabilitation (same as CDCR)

DOM Department of General Services
DOM Department Operations Manual
DUI Driving Under the Influence

**EBCRP** East Bay Community Recovery Project (a CPMP contractor)

**FFP** Family Foundations Program

**FOPS** Female Offender Program Services

LACADA Los Angeles Center for Alcohol and Drug Abuse

**LCSW** Licensed Clinical Social Worker

**OLS** Office of Legal Services

PC Penal Code

**SPA** Savings Program Agreement

**TB** Tuberculosis

WCSU Women and Children's Services Unit